Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination

# United States District Court

2022 NOV 28 for the District of Nebraska Division Case No. Eddie E. B (Write the full name of each plaintiff who is filing this complaint. Jury Trial: (check one) If the names of all the plaintiffs cannot fit in the space above. please write "see attached" in the space and attach an additional page with the full list of names.) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please

## COMPLAINT FOR EMPLOYMENT DISCRIMINATION

### I. The Parties to This Complaint

with the full list of names.)

write "see attached" in the space and attach an additional page

### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Eddie Brown Name 1200 Washingtonst APT 3 Street Address Lincoln, Lancaster City and County NEbraska, 68502 State and Zip Code 402-428-4134 Telephone Number eddie brown 698/ agmailicom E-mail Address

### В. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

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Defendant No. 1  Name  Job or Title (if known)  Street Address  City and County  State and Zip Code  Telephone Number	Sam Miller Plant Manager 4700 S. 19th St Lincoln, Lancaster NEbraska, 68512 888-752-4809
E-mail Address (if known)	Smillera NE book, Lom
Defendant No. 2	
Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
Defendant No. 3	
Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (if known)	
Defendant No. 4	
Name	
Job or Title (if known)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	_
E-mail Address (if known)	

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	C.	Place of Employment
		The address at which I sought employment or was employed by the defendant(s) is
		Name  NE. BOOK Company  H700 S. 19th St
		City and County Lincoln, Lancaster
		State and Zip Code NEhraska 68512
		Telephone Number 898-752-4809
II.	Basis	for Jurisdiction
	This a	ction is brought for discrimination in employment pursuant to (check all that apply):
	[	Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race,
		color, gender, religion, national origin).
		(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
	[	Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.
		(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)
	[	Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.
		(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)
	[	Other federal law (specify the federal law):
	[	Relevant state law (specify. if known):
	[	Relevant city or county law (specify, if known):

# III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiffs rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A.	The discrimin	atory conduct of which I complain in this action includes (check all that apply):		
		Failure to hire me.		
		Termination of my employment.		
		Failure to promote me.		
		Failure to accommodate my disability.		
		Unequal terms and conditions of my employment.		
		Retaliation.		
		Other acts (specify):		
		(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)		
В.	It is my best re $1 - 25 -$	ecollection that the alleged discriminatory acts occurred on date(s)		
C.	I believe that defendant(s) (check one):			
		is/are still committing these acts against me.		
		is/are not still committing these acts against me.		
D.	Defendant(s)	discriminated against me based on my (check all that apply and explain):  race  color  gender/sex  religion  national origin		
	$\sqsubseteq$	age (year of birth) (only when asserting a claim of age discrimination.)		
		disability or perceived disability (specify disability)		
E.	The facts of n	ny case are as follows. Attach additional pages if needed.		

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		your charge fi	litional support for the facts of your claim, you may attach to this complain led with the Equal Employment Opportunity Commission, or the charge fil or city human rights division.)	
IV.	Exhaust	tion of Federal	Administrative Remedies	
	A.		ecollection that I filed a charge with the Equal Employment Opportunity Coloyment Opportunity counselor regarding the defendant's alleged discrimination	
		09	12-2022	
	B.	The Equal Em	ployment Opportunity Commission (check one):	
			has not issued a Notice of Right to Sue letter.	
			issued a Notice of Right to Sue letter, which I received on (date)	
			(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Opportunity Commission to this complaint.)	Employment
	C.	Only litigants	alleging age discrimination must answer this question.	
		•	y charge of age discrimination with the Equal Employment Opportunity C defendant's alleged discriminatory conduct (check one):	ommission
			60 days or more have elapsed.	
			less than 60 days have elapsed.	
v.	Relief			
	argumer amounts or exem	nts. Include any s of any actual d plary damages o	ely what damages or other relief the plaintiff asks the court to order. Do not basis for claiming that the wrongs alleged are continuing at the present tin amages claimed for the acts alleged and the basis for these amounts. Includation and the amounts, and the reasons you claim you are entitled to actual or	ne. Include the de any punitive or punitive
	money C	iamages. I	am asking the Damage for D	liscriminati
		Pur	ritive Damage	
		Em	otional Damage	
		600	187 Filing Ree	Page 5 of 6

VI.	Certific	ation and Closing
	and belie unnecess nonfrivo evidentia opportur	ederal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, of that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause sary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a clous argument for extending, modifying, or reversing existing law; (3) the factual contentions have ary support or, if specifically so identified, will likely have evidentiary support after a reasonable nity for further investigation or discovery; and (4) the complaint otherwise complies with the nents of Rule 11.
	A.	For Parties Without an Attorney
		I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.
		Date of signing: 11-28-2022
		Signature of Plaintiff  Eddie Brown  Printed Name of Plaintiff  Eddie Brown
	В.	For Attorneys

# Signature of Attorney Printed Name of Attorney Bar Number Name of Law Firm

Street Address

State and Zip Code
Telephone Number
E-mail Address